

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 831843 RECEIPT DATE: 05 / 14 / 01
IA NUMBER: PCT/ US99 / 28449 IA FILING DATE: 12 / 01 / 99
FAMILY NAME: GOTTESMAN DELAY WAIVED (Y/N): Y
GIVEN NAME: ODED DEMAND RECEIVED (Y/N): N
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 12 / 01 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 1279-277 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 0000000 TELEPHONE 00000000000
FAX

NAME: BERLINER, ROBERT
FULBRIGHT & JAWORSKI

STREET: 865 SOUTH FIGUEROA STREET 29TH FLOOR

CITY: LOS ANGELES

STATE/COUNTRY: CA ZIP: 900172571

EMAIL:

APPLICATION TITLES:
ENHANCED WAVEFORM INTERPOLATIVE CODER

TAB TO LAST POSITION, PUSH SEND